PATENT APPLICATION FEE DETERMINATION RECORD									Ap	Application or Docket Number			
Effective December 8, 2004									10/539,687				
	٠	CLAIMS	AS FILED (Cotur		(Column 2)			SMALL EN	ш <u>ү</u>	OR		R THAN ENTITY	
U.S. NATIONAL STAGE FEES							7	RATE	FEE	7	RATE	FEE	
BASIC FEE			SMALL EN	SMALL ENT. = \$ 150		RGE ENT. = \$ 300	1	BASIC FEE		OR	BASIC FEE	300	
EXAMINATION FEE				Satisfies PCT Article 33(1)- (4) = \$50/\$100		other situations = \$ 100 / \$ 200	1-	EXAM. FEE		1	EXAM FEE	200	
SEARCH FEE			U.S. is ISA = ALL other or	U.S. is ISA = \$50 /\$ 100 ALL other countries = \$ 200 / \$ 400		other situations = \$ 250 / \$ 500		SEARCH FEE		1	SEARCH FEE	400	
FEE FOR EXTRA SPEC. PGS.			mir	minus 100 =		/ 50 =	1	X \$ 125 =		1.	X \$ 250 =		
TOTAL CHARGEABLE CLAIMS			19 m	19 minus 20 =			1	X\$25=		OR	X \$ 50 =		
INDEPENDENT CLAIMS			3	ninus 3 =	•		1	X \$ 100 =		OR	X \$ 200 =	_	
MULTIPLE DEPENDENT CLAIM PRE			RESENT			회	1	+\$ 180 =		OR	+ \$ 360 =	360	
H	the differenc		TOTAL		OR	TOTAL	1360						
CLAIMS AS AMENDED - PART II (Cotumn 1) (Cotumn 2) (Cotumn 3)								SMALL	OTHER THAN NTITY OR SMALL ENTITY				
AMENDMENT A	16	CLAIMS REMAINING AFTER AMENDMENT		HIGHE NUME PREVIO PAID F	BER USLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	. 19	Minus .	-20	2	<b>-</b> 0		X \$ 25 =		OR	X \$ 50 =		
	Independent	. 3	Minus	-3		Q		X \$ 100 =		OR	X \$ 200 =		
	FIRST PRESENTATION OF MULTIPLE DEPENDENT C				LAIM			+ \$ 180 =		OR	+ \$ 360 =		
					TOTAL ADOIT. FEE	•	OR	TOTAL ADDIT. FEE					
		(Column 1)		(Colum	n 21	(Column 3)							
2 -		CLAIMS REMAINING AFTER AMENDMENT		HIGHE NUMBI PREVIOL PAID FI	ST ER JSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	<b>Fotal</b>	. 16	Minus	" 2	20			X \$ 25 =	•	OR	X \$ 50 =	_	
	ndependent	. 3	Minus		3	-		X \$ 100 =		OR	X \$ 200 =	_	
	FIRST PRESE	ENTATION OF M	ULTIPLE DEPE	ENDENT CL	MIA			+ \$ 180 =		OR	+ \$ 360 =		
						•	٦	FEE		OR T	FEE		
					•				•				
* #	the "Highest Nur the "Highest Nur	nn 1 is less than the nber Previously Paid nber Previously Paid ber Previously Paid i	For IN THIS SPA	ACE is less th ACE is less th	120 '20' 120 '3',	, enter "20". enter "3".	in the	appropriate box	in column 1,				

FORM PTO-875 (Rev. 02/2005)

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